

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City of Imperial Beach		2009 OCT 12 A 8:54	
Division, Department, or Region (if applicable)			
Street Address			
825 Imperial Beach Blvd., Imperial Beach, CA 91932			
Area Code/Phone Number	E-mail		
(619) 423-8301	ibccclerk@cityofib.org		
Agency Contact (name and title)		<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Jacqueline M. Hald, City Clerk			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10 / 09 / 09 Description of Event: The Comedy Palace

Face Value of Ticket: \$ 50.00

Agency Event ☐ Yes ☒ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: The Comedy Palace

Number of Tickets Received: 12 Ticket(s) Provided to Agency: ☒ Gratuitously ☐ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Chris Helmer	1	5.3 (j) City employee drawing.
Angel Guerrero	2	5.3 (j) City employee drawing.
Perly Shouse	1	5.3 (j) City employee drawing.

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: City of Imperial Beach

Name of Individual or Organization: Erika N. Ceja Number of Tickets: 4

Description of Organization: Local Government

Address of Organization: 825 Imperial Beach Blvd., Imperial Beach, CA 91932


Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5.3(h) Attracting and retaining highly qualified employees in City Service.

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 Gary Brown City Manager 10/7/09
 Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)